Fairfield County Medical Association

Physicians Dedicated to a Healthier Fairfield County

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Memorandum of Support

H.B. 6158
An Act Concerning Vaccine Distribution

Public Health Committee

March 8, 2013

Senator Gerrantana, Representative Johnson and distinguished members of the Public Health Committee, my name is Mark Thompson and I am the executive director of the Fairfield County Medical Association. On behalf of our 1500 plus physician members, we appreciate the opportunity to present this testimony in favor of House Bill 6158: An Act Concerning Vaccine Distribution.

Section 212 of Public Act 12-1 mandates that the Connecticut Department of Public Health be the exclusive supplier of childhood vaccines as of January 1, 2013. The new vaccine law is summarized by DPH in its September 28, 2012 cover memorandum to Connecticut health care providers as follows: "[R]evisions to CT General Statute 19a-7f implemented during the past legislative session now requires that beginning January 1, 2013 all health care providers who administer vaccines from birth through 18 years of age obtain those vaccines through the Connecticut Vaccine Program.

While this is not an exhaustive list, here are a few reasons why the mandate to procure all vaccines from the State is not a good idea:

- The mandate to use vaccine solely provided by the state passed as part of a budget implementer bill
 during the 2012 legislative session. This major public policy change occurred without the benefit of a
 public hearing and without going through the normal legislative process. Public policy changes of this
 magnitude should be openly discussed and fully vetted by the usual legislative process.
- The vaccine mandate was created in search of a problem. Connecticut already has some of the highest immunization rates in the nation according to the national Center for Disease Control and the mandate will not do anything to improve the immunization rates in birth to the pre-school age category.
- North Carolina embarked on the similar path and it was a disaster as the funding ran out to cover the
 costs. The monitoring of children needing vaccine was an administrative nightmare. North Carolina
 has since returned to both a public and private purchase of vaccine. We understand Washington State
 is having similar problems.
- Many smaller medical practices, particularly non-pediatric groups, are opting not to participate in Connecticut's Vaccine Program because of added administrative burdens and increased risk of liability and financial exposure.

- The state mandated program is significantly increasing practice overhead costs while simultaneously reducing revenues. We are hearing of medical practices losing as much as five percent of their revenue stream while the administrative paperwork increased significantly. The vaccine program is tantamount to an unfunded mandate on medical practices.
- Ironically, the voluntary aspect to participate in the state mandated program requires physicians to sign a three-page agreement with the state. Because the agreement was non-negotiable, the Fairfield County Medical Association supplied its members with a *Reservation of Rights* letter to help protect the interest of medical practices in case something goes wrong. The state's agreement added significant liability and financial exposure for the physicians.
- The State of Connecticut, essentially, created a monopoly for itself with the vaccine mandate. This action begs the question what else may the state want to take over the supply and control of antibiotics and other prescriptions, chemotherapeutic medications, etc.?
- Medical practices no longer receive the preferred purchasing discounts from the manufacturers/suppliers for the other vaccines they may purchase because the order volume has been greatly diminished.
- The Department of Public Health, when questioned, stated the reason why the mandate was
 implemented was to improve the vaccination rates in the preschool aged children. But there is no
 evidence to show how the state takeover of the vaccine distribution will improve the immunization rates
 in this age category and already we are seeing the opposite result.
- Some medical practices that operate close to the state border have considered re-locating outside of Connecticut in order to avoid the vaccine mandate. Should this happen Connecticut will lose sorely needed physicians and patients will suffer.

Thank you for the opportunity to speak and we ask you give serious consideration to amending the law and allow physicians and other providers the choice where they obtain their vaccine.

Memo of support/hb6158_Vaccine Distribution